

## UTILITY

Attorney Docket No.

2000-0623

Total Pages

29

PATENT APPLICATION  
TRANSMITTAL

First Named Inventor or Application Identifier

Michael Kocheisen et al.

Express Mail Label No.

EL924384619US

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

## ADDRESS TO:

Assistant Commissioner for Patents  
Box Patent Application  
Washington, D.C. 20231

1. ☒ Fee Transmittal Form  
(submit an original, and a duplicate for fee processing)
2. ☒ Specification [Total Pages 13]  
(preferred arrangement set forth below)
- Descriptive title of invention
  - Cross References to Related Applications
  - Statement Regarding Fed sponsored R&D
  - Reference to Microfiche Appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings(if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
3. ☒ Drawing(s)(35 USC 113) [Total Sheets 4]
4. Oath or Declaration [Total Pages 4]
- a. ☐ Newly executed (original or copy)
- b. ☐ Copy from a prior application(37 CFR 1.63(d))  
(for continuation/divisional with Box 15 completed)  
[Note Box 15 below]
- i. ☐ DELETION OF INVENTOR(S)  
Signed statement attached deleting inventor(s)  
named in the prior application, see 37 CFR  
163(d)(2) and 1.33(b)

5. ☐ Microfiche Computer Program (Appendix)
6. ☐ Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)
- a. ☐ Computer Readable Copy
- b. ☐ Paper Copy(identical to computer copy)
- c. ☐ Statement verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

7. ☒ Assignment Papers(cover sheet & document(s))
8. ☐ 37 CFR 3.73(b)Statement ☒ Power of Attorney
9. ☐ English Translation Document (if applicable)
10. ☐ Information Disclosure ☐ Copies of IDS  
Statement(IDS)/PTO-1449 Citations
11. ☐ Preliminary Amendment
12. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
13. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
14. ☒ Other: Request and Certification

15. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior Application No:

Prior application information: Examiner:

Group/Art Unit:

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 16. CORRESPONDENCE ADDRESS

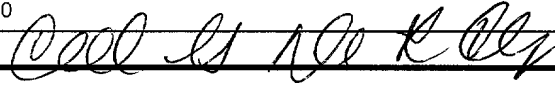
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## 17. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

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I hereby certify that this application is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington D.C. , 20231

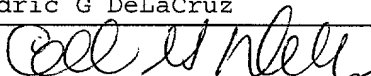
Shawn McGee

(Printed Name of Person Mailing Paper)

(Signature of Person Mailing Paper)

|   |       |                          |                          |
|---|-------|--------------------------|--------------------------|
| <b>10/10/01</b><br><b>1048 U.S.</b><br><b>FEE TRANSMITTAL</b><br>Patent Fees are subject to annual revision |       | <b>Complete if Known</b> |                          |
|   |       | Application Number       |                          |
|   |       | Filing Date              |                          |
|   |       | First Named Inventor     | Michael Kocheisen et al. |
|   |       | Examiner Name            |                          |
| TOTAL AMOUNT PAID   | \$750 | Group/Art Unit           |                          |
|   |       | Attorney Docket No.      | 2000-0623                |

| <b>METHOD OF PAYMENT (check one)</b><br>1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:<br><br>Deposit Account Number 01-2745<br>Deposit Account Name AT&T CORP.<br><br><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing Date of the Notice of Allowance   |                | <b>FEE CALCULATION (continued)</b><br><b>3. ADDITIONAL FEES</b> <table border="1"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee(\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>127</td><td>50</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>139</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>147</td><td>2520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>112*</td><td>920</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>113*</td><td>1840</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>115</td><td>110</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>116</td><td>390</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>117</td><td>890</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>118</td><td>1390</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>128</td><td>1890</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>119</td><td>310</td><td>Notice of Appeal</td><td></td></tr> <tr><td>120</td><td>310</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>121</td><td>270</td><td>Request for oral hearing</td><td></td></tr> <tr><td>138</td><td>1510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>140</td><td>110</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>141</td><td>1240</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>142</td><td>1240</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>143</td><td>440</td><td>Design issue fee</td><td></td></tr> <tr><td>122</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>123</td><td>50</td><td>Petitions related to provisional applications</td><td></td></tr> <tr><td>126</td><td>240</td><td>Submission of Information Disclosure Statement</td><td></td></tr> <tr><td>581</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td>40</td></tr> <tr><td>146</td><td>710</td><td>Filing a submission after final rejection(37 CFR 1.129(a))</td><td></td></tr> <tr><td>149</td><td>710</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td colspan="4">Other fee (specify)</td></tr> <tr><td colspan="4">Other fee (specify)</td></tr> <tr> <td colspan="3"> <b>* Reduced by Basic Filing Fee Paid</b> </td> <td> <b>SUBTOTAL(3)</b> 40         </td> </tr> </tbody> </table> |                       | Large Fee Code  | Entity Fee(\$) | Fee Description | Fee Paid               | 105  | 130 | Surcharge - late filing fee or oath |     | 127               | 50                        | Surcharge - late provisional filing fee or cover sheet |     | 139   | 130 | Non-English specification |   | 147                    | 2520 | For filing a request for reexamination |  | 112* | 920 | Requesting publication of SIR prior to Examiner action  |  | 113*  | 1840 | Requesting publication of SIR after Examiner action |  | 115                 | 110 | Extension for reply within first month |  | 116      | 390    | Extension for reply within second month |          | 117    | 890   | Extension for reply within third month |          | 118                       | 1390 | Extension for reply within fourth month |     | 128 | 1890 | Extension for reply within fifth month |  | 119 | 310 | Notice of Appeal |  | 120 | 310 | Filing a brief in support of an appeal |  | 121 | 270 | Request for oral hearing |  | 138 | 1510 | Petition to institute a public use proceeding |  | 140 | 110 | Petition to revive - unavoidable |  | 141 | 1240 | Petition to revive - unintentional |  | 142 | 1240 | Utility issue fee (or reissue) |  | 143 | 440 | Design issue fee |  | 122 | 130 | Petitions to the Commissioner |  | 123 | 50 | Petitions related to provisional applications |  | 126 | 240 | Submission of Information Disclosure Statement |  | 581 | 40 | Recording each patent assignment per property (times number of properties) | 40 | 146 | 710 | Filing a submission after final rejection(37 CFR 1.129(a)) |  | 149 | 710 | For each additional invention to be examined (37 CFR 1.129(b)) |  | Other fee (specify) |  |  |  | Other fee (specify) |  |  |  | <b>* Reduced by Basic Filing Fee Paid</b> |  |  | <b>SUBTOTAL(3)</b> 40 |
|---|----------------|--|-----------------------|-----------------|----------------|-----------------|------------------------|--|-----|-------------------------------------|-----|-------------------|---------------------------|--|-----|---|-----|---------------------------|---|------------------------|------|--|--|------|-----|---|--|---|------|---|--|---------------------|-----|--|--|----------|--------|---|----------|--------|-------|--|----------|---------------------------|------|---|-----|-----|------|--|--|-----|-----|------------------|--|-----|-----|--|--|-----|-----|--------------------------|--|-----|------|---|--|-----|-----|----------------------------------|--|-----|------|------------------------------------|--|-----|------|--------------------------------|--|-----|-----|------------------|--|-----|-----|-------------------------------|--|-----|----|---|--|-----|-----|--|--|-----|----|--|----|-----|-----|--|--|-----|-----|--|--|---------------------|--|--|--|---------------------|--|--|--|---|--|--|-----------------------|
| Large Fee Code  | Entity Fee(\$) | Fee Description  | Fee Paid              |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 105   | 130            | Surcharge - late filing fee or oath  |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 127   | 50             | Surcharge - late provisional filing fee or cover sheet   |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 139   | 130            | Non-English specification  |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 147   | 2520           | For filing a request for reexamination   |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 112*  | 920            | Requesting publication of SIR prior to Examiner action   |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 113*  | 1840           | Requesting publication of SIR after Examiner action  |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 115   | 110            | Extension for reply within first month   |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 116   | 390            | Extension for reply within second month  |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 117   | 890            | Extension for reply within third month   |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 118   | 1390           | Extension for reply within fourth month  |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 128   | 1890           | Extension for reply within fifth month   |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 119   | 310            | Notice of Appeal   |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 120   | 310            | Filing a brief in support of an appeal   |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 121   | 270            | Request for oral hearing   |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 138   | 1510           | Petition to institute a public use proceeding  |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 140   | 110            | Petition to revive - unavoidable   |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 141   | 1240           | Petition to revive - unintentional   |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 142   | 1240           | Utility issue fee (or reissue)   |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 143   | 440            | Design issue fee   |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 122   | 130            | Petitions to the Commissioner  |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 123   | 50             | Petitions related to provisional applications  |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 126   | 240            | Submission of Information Disclosure Statement   |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 581   | 40             | Recording each patent assignment per property (times number of properties)   | 40                    |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 146   | 710            | Filing a submission after final rejection(37 CFR 1.129(a))   |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 149   | 710            | For each additional invention to be examined (37 CFR 1.129(b))   |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| Other fee (specify)   |                |  |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| Other fee (specify)   |                |  |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| <b>* Reduced by Basic Filing Fee Paid</b>   |                |  | <b>SUBTOTAL(3)</b> 40 |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| <b>FEE CALCULATION</b><br><b>1. FILING FEE</b> <table border="1"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee(\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>101</td><td>710</td><td>Utility(37CFR 1.53(b)) / CPA(37CFR 1.53(d)) Filing Fee</td><td>710</td></tr> <tr><td>106</td><td>320</td><td>Design Filing Fee</td><td></td></tr> <tr><td>108</td><td>710</td><td>Reissue Filing Fee</td><td></td></tr> <tr><td>114</td><td>150</td><td>Provisional Filing Fee</td><td></td></tr> <tr> <td colspan="3"><b>SUBTOTAL (1)</b></td> <td>710</td> </tr> </tbody> </table> |                | Large Fee Code   | Entity Fee(\$)        | Fee Description | Fee Paid       | 101             | 710                    | Utility(37CFR 1.53(b)) / CPA(37CFR 1.53(d)) Filing Fee | 710 | 106                                 | 320 | Design Filing Fee |                           | 108  | 710 | Reissue Filing Fee                              |     | 114                       | 150   | Provisional Filing Fee |      | <b>SUBTOTAL (1)</b>                    |  |      | 710 | <b>2. CLAIMS</b> <table border="1"> <tr> <td colspan="2"> <input type="checkbox"/> Filing Under 37CFR 1.53 (b)<br/> <input type="checkbox"/> CPA Under 37CFR 1.53 (d)<br/> <input type="checkbox"/> Amendment         </td> <td colspan="2"></td> </tr> <tr> <td colspan="2"> <b>Extra Claims</b> </td> <td colspan="2"> <b>Fee from below</b> </td> </tr> <tr> <td>Total 20</td> <td>- 20 =</td> <td>0</td> <td>x 18 = 0</td> </tr> <tr> <td>Ind. 3</td> <td>- 3 =</td> <td>0</td> <td>x 80 = 0</td> </tr> <tr> <td colspan="2">Multiple Dependent Claims</td> <td></td> <td>= 0</td> </tr> </table> |  | <input type="checkbox"/> Filing Under 37CFR 1.53 (b)<br><input type="checkbox"/> CPA Under 37CFR 1.53 (d)<br><input type="checkbox"/> Amendment |      |   |  | <b>Extra Claims</b> |     | <b>Fee from below</b>                  |  | Total 20 | - 20 = | 0                                       | x 18 = 0 | Ind. 3 | - 3 = | 0                                      | x 80 = 0 | Multiple Dependent Claims |      |   | = 0 |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| Large Fee Code  | Entity Fee(\$) | Fee Description  | Fee Paid              |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 101   | 710            | Utility(37CFR 1.53(b)) / CPA(37CFR 1.53(d)) Filing Fee   | 710                   |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 106   | 320            | Design Filing Fee  |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 108   | 710            | Reissue Filing Fee   |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 114   | 150            | Provisional Filing Fee   |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| <b>SUBTOTAL (1)</b>   |                |  | 710                   |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| <input type="checkbox"/> Filing Under 37CFR 1.53 (b)<br><input type="checkbox"/> CPA Under 37CFR 1.53 (d)<br><input type="checkbox"/> Amendment   |                |  |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| <b>Extra Claims</b>   |                | <b>Fee from below</b>  |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| Total 20  | - 20 =         | 0  | x 18 = 0              |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| Ind. 3  | - 3 =          | 0  | x 80 = 0              |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| Multiple Dependent Claims   |                |  | = 0                   |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| <table border="1"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee(\$)</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr><td>103</td><td>18</td><td>Claims in excess of 20</td></tr> <tr><td>102</td><td>80</td><td>Independent Claims in excess of 3</td></tr> <tr><td>104</td><td>270</td><td>Multiple Dependent Claims</td></tr> <tr><td>109</td><td>80</td><td>Reissue independent claims over original patent</td></tr> <tr><td>110</td><td>18</td><td>Reissue claims in excess of 20 and over original patent</td></tr> <tr> <td colspan="3"><b>SUBTOTAL (2)</b> 0</td> </tr> </tbody> </table>      |                | Large Fee Code   | Entity Fee(\$)        | Fee Description | 103            | 18              | Claims in excess of 20 | 102  | 80  | Independent Claims in excess of 3   | 104 | 270               | Multiple Dependent Claims | 109  | 80  | Reissue independent claims over original patent | 110 | 18                        | Reissue claims in excess of 20 and over original patent | <b>SUBTOTAL (2)</b> 0  |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| Large Fee Code  | Entity Fee(\$) | Fee Description  |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 103   | 18             | Claims in excess of 20   |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 102   | 80             | Independent Claims in excess of 3  |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 104   | 270            | Multiple Dependent Claims  |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 109   | 80             | Reissue independent claims over original patent  |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| 110   | 18             | Reissue claims in excess of 20 and over original patent  |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |
| <b>SUBTOTAL (2)</b> 0   |                |  |                       |                 |                |                 |                        |  |     |                                     |     |                   |                           |  |     |   |     |                           |   |                        |      |  |  |      |     |   |  |   |      |   |  |                     |     |  |  |          |        |   |          |        |       |  |          |                           |      |   |     |     |      |  |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |      |   |  |     |     |                                  |  |     |      |                                    |  |     |      |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |    |     |     |  |  |     |     |  |  |                     |  |  |  |                     |  |  |  |   |  |  |                       |

|                       |   |  |  |                                 |            |
|-----------------------|---|--|--|---------------------------------|------------|
| <b>SUBMITTED BY</b>   |   |  |  | <b>Complete (if applicable)</b> |            |
| Typed or Printed Name | Cedric G DeLaCruz   |  |  | Reg. Number                     | 36498      |
| Signature             |  |  |  | Date                            | 07/10/2001 |
|                       |   |  |  | Deposit Account User ID         |            |

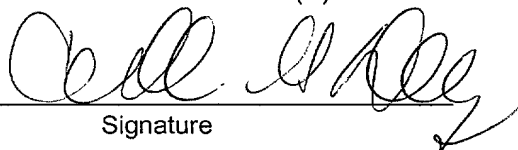
SEND TO: Assistant Commissioner for Patents, Washington, D.C. 20231

|  |                      |   |
|--|----------------------|---|
| <b>REQUEST AND CERTIFICATION</b><br><br><b>UNDER</b><br><b>35 U.S.C. 122(b)(2)(B)(i)</b> | First Named Inventor | Michael Kocheisen<br>et al.   |
|  | Title:               | SYSTEM AND METHOD FOR<br>PROVIDING ENHANCED SERVICE<br>ACTIVATION FOR AUXILIARY<br>SERVICES |
|  | Atty. Docket Number  | 2000-0623   |

I hereby certify that the invention disclosed in the attached application **has not and will not be** the subject of an application filed in another country, or under a multilateral agreement, that requires publication at eighteen months after filing. I hereby request that the attached application not be published under 35 U. S. C. 122(b).

7-10-01

Date



Signature

Cedric G. DeLaCruz

This request must be signed in compliance with 37 CFR 1.33(b) and submitted with the application **upon filing**.

Applicant may rescind this nonpublication request at any time. If applicant rescinds a request that an application not be published under 35 U.S.C. 122(b), the application will be scheduled for publication at eighteen months from the earliest claimed filing date for which a benefit is claimed.

If applicant subsequently files an application directed to the invention disclosed in the attached application in another country, or under a multilateral international agreement, that requires publication of applications eighteen months after filing, the applicant **must** notify the United States Patent and Trademark Office of such filing within forty-five (45) days after the date of the filing of such foreign or international application. **Failure to do so will result in abandonment of this application (35 U. S. C. 122(b)(2)(B)(iii)).**

FOOTNOTES